

## Application Data Sheet

### **Application Information**

Application Type:: Reissue  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-Rom or CD-R? None  
Title:: Playback Device Having Text Display and Communication  
with Remote Database of Titles  
  
Attorney Docket Number:: 03-622-F  
  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 4  
Small Entity:: No  
Petition Included?:: No  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Scott A.  
Family Name:: Jones  
City of Residence:: Carmel  
State of Residence:: Indiana  
Country of Residence:: US  
Street of mailing address:: 1150 West 116th Street

City of mailing address:: Carmel  
State or Province of mailing address:: Indiana  
Postal or Zip Code of mailing address:: 46032

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Douglas M.  
Family Name:: Keenan  
City of Residence:: Noblesville  
State of Residence:: Indiana  
Country of Residence:: US  
Street of mailing address:: 505 Tamarack Lane  
City of mailing address:: Noblesville  
State or Province of mailing address:: Indiana  
Postal or Zip Code of mailing address:: 46060

### **Correspondence Information**

Correspondence Customer Number:: 020306  
Name Line One:: Eric R. Moran  
Name Line Two:: McDonnell Boehnen Hulbert & Berghoff  
Street of Mailing Address :: 300 S. Wacker Drive  
City of Mailing Address:: Chicago  
State or Providence of Mailing Address:: IL  
Country of Mailing Address:: USA  
Postal or Zip Code of Mailing Address:: 60606  
Phone Number:: (312) 913-0001  
Fax Number:: (312) 913-0002  
E-Mail Address:: docketing@mbhb.com

**Representative Information**

Representative Customer Number::	020306
----------------------------------	--------

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Assignee Information**

Assignee Name:: Digital Networks North America, Inc.